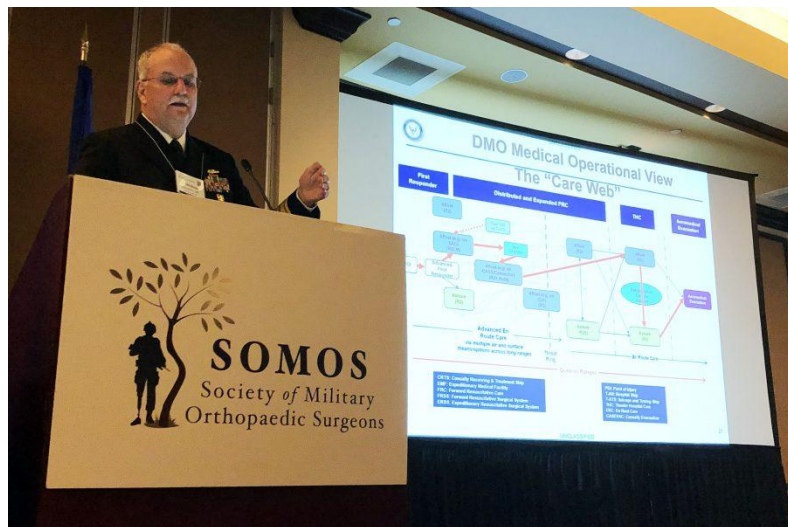


NAVY SURGEON GENERAL SPEAKS TO MILITARY ORTHOPAEDIC SURGEONS ABOUT THE FUTURE FIGHT

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WEST PALM BEACH, Florida (Dec. 18, 2019) Rear Adm. Bruce Gillingham, Surgeon General of the U.S. Navy, gives a talk on the future of warfare and how Navy Medicine plans to use a "care web" to support the warfighter at the 61st Annual meeting of the Society of Military Orthopaedic Surgeons. US Navy photo by CDR

Denver Applehans/Released.

U.S. Navy Surgeon General, Rear Adm. Bruce Gillingham, spoke to a crowd of joint and allied military surgeons at the 61st Annual meeting of the Society of Military Orthopaedic Surgeons in West Palm Beach, Florida on Dec. 18 about what a future war might look like and how Navy Medicine can support survivability of the warfighter.

"The high end fight is all about lethality for the Department of Defense. As folks who took the Hippocratic Oath, how do we contribute to lethality? Our role is the maximal preparation of the warfighter and then their maximum survival in the high end fight," said Gillingham. "We're looking at the concept of a care web ... depending on location, geography and operational circumstance. We have to be thinking about the concepts of prolonged field care and how do we meet that challenge."

The Surgeon General's remarks focused on the need to better understand how distance, communication disruption, contested airspace, resupply delay and transportation availability will play into possible future war and how Navy Medicine is working to address the identified gaps.

"In this new care web, we are not going to have predictable patient movement, so the receiving teams are going to have to go with it and work through those challenges," said Gillingham.

Gillingham identified several ways in which Navy Medicine is working to provide the training and tools to address those challenges in a future fight. He noted how movement within the care web may not always provide a higher level of care, but different capabilities in at the same level of care in different locations may overcome some of the challenges to increase overall survivability. Modular and scalable units that allow doctors to provide resuscitative care forward, whether ashore or afloat, is one method Navy Medicine is looking at to bring medical care closer to where the need is in a widely distributed battlefield. In route care aboard dedicated or multi-role vessels and aircraft is another tool that can be added to expedite patient movement while providing care. A third method is to increase individual unit ability to stabilize and hold patients for extended times while working to get these patients into the care web.

In general, noted Gillingham, the Great Power Competition and the subsequent development of distributed operations concepts requires that we completely rethink how the U.S. Navy provides maritime medical care. Navy medicine will have to reconfigure what is currently available and shape new acquisitions to make them more agile, more modular and adaptive. Navy Medicine is also training our people to work within this care web and to be innovative to increase survivability in this difficult environment. The Society of Military Orthopaedic Surgeons is a forum for the exchange of medical knowledge as it relates to the practice of Orthopaedic surgery in the military. The annual meeting offers an opportunity for sharing scientific research, discussion of best practices and a look at the future of military medicine.